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THINGOE RURAL

DISTRICT COUNCIL.

ANNUAL REPORT

OF THE

Medical Officer of Health,

FOR THE YEAR 1925,

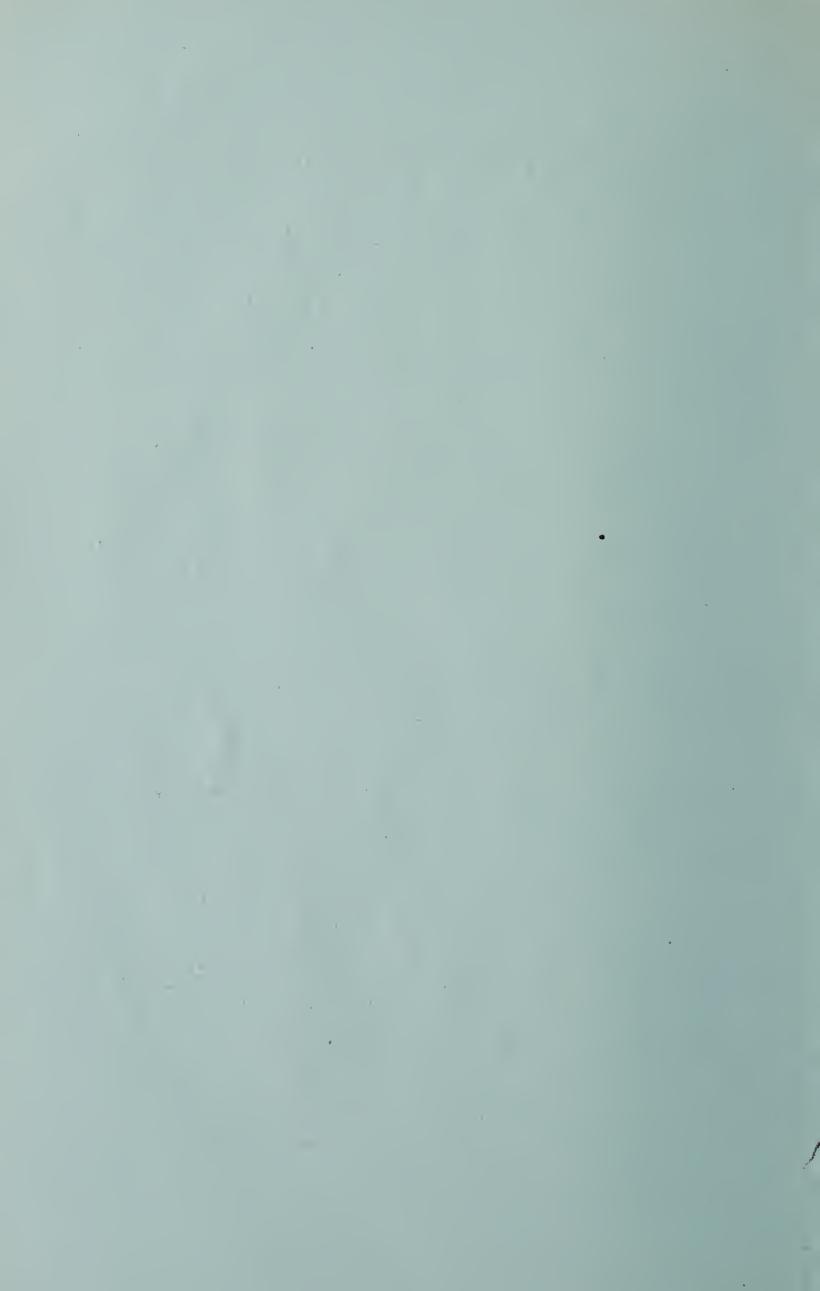
BY

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Fellow of the Incorporated Society of Medical Officers of Health.



THINGOE RURAL DISTRICT.

To the Thingoe Rural District Council.

LADIES AND GENTLEMEN,

I have the honour to lay before you my forty-eighth Annual Report on the Sanitary Condition of the Thingoe Rural District for the year 1925.

The Minister of Health has issued a circular directing the "Annual Report for 1925 to be a Survey Report," dealing with the preceding five years. The subjects to be dealt with falling under the following main heads:—

Natural and Social Conditions of the Area.

General Provision of Health Services in the Area.

Sanitary Circumstances of the Area.

Housing.

Inspection and Supervision of Food.

Prevalence of, and Control over, Infectious Diseases.

Maternity and Child Welfare.

I propose therefore, to the best of my ability, to deal with these matters in the order specified in the Appendix to the Circular.

NATURAL AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres)	• • •	• • •		83,998
Population (Census 1921)	• • •	• • •	•••	13,390
Population (Estimated 1925))	• • •	• • •	13,540

Physical features and general character of the area. This may briefly be stated as follows:—

This is essentially an agricultural district, most of the land being under cultivation. The subsoil consists mainly of chalk, which is covered by beds of clay, gravel, or sand of varying depths; the chalk, however, rises to the surface in places. The River Lark and its tributaries run through the central part of the district, mainly in a Northerly direction; while in the Eastern portion it is traversed by some tributaries of the Little Ouse.

The highest part of the district is about 400 feet above the sea level.

The Rain fall for the past five years was-

1920		• • •	21.49	inches
*1921	• • •	• • •	11.98	"
1922		• • •	22.68	22
1923	• • •	• • •	26.66	,,
1924	•••	•••	29.04	,,
Average			$\frac{-}{22.91}$.,
11.01.05		• • • •		

*(10.93 inches below the average).

The following Table shows the Rainfall for each month of the year 1925.

	ę		Inches
January	• • •	• • •	1.18
February	• • •	• • •	2.64
March	3	• • •	1.46
April	• • •	• • •	2.42
May	• • •	• • •	2.02
June	• • •	• • •	•58
July	* * *	•••	1.15
August	• • •	• • •	2.08
September	• • •	•••	3.69
October	• • •	• • •	2.69
November	•••		2.60
December	• • •	• • •	1.78
	Total	. •••	$24 \cdot 29$

Number of Inhabited Houses (1921), 3,434.

Number of Families or separate Occupiers (1921), 3,442.

The Rateable Value was £77,478.

Sum represented by a Penny Rate was £209 6s. 6d.

Social conditions, including the chief occupation of the inhabitants:—

The population is mainly connected with the Agricultural industry. The district however, contains several large Estates and many Residential Houses.

Within the last year a Sugar Beet Factory has been established within the bounds of Bury St. Edmund's, which has found employment for many men in the vicinity.

There is no particular occupation prejudicial to the Public Health.

VITAL STATISTICS.

Births-During 1925.		Total.	Males.	Females.
Legitimate	•••	217	112	105
Illegitimate	•••	17	8	9
				parameter annual parame
		234	120	114

Birth-rate 17.2 per 1000 of the population.

Birth-rate for England and Wales 18-3 per 1000.

Births during previous five years:—

		Total.	Male.	Female.	Birth-rate.
1920	. •••	350	193	157	$24 \cdot 23$
1921	•••	298	146	152	23.0
1922	• • •	231	114	117	18.22
1923	• • •	245	129	116	19.49
1924	•••	224	112	112	17.13

It will be noticed that the Birth-rate for 1925 was below the average of the last five years.

Deaths during 1925.	Total.	Male.	Female.
9	152	87	65

Death-rate 11.22 per 1000.

Death-rate England and Wales 12.2 per 1000.

During the previous five years.

	Number of deaths.	Death-rate.
1920	133	9.28
1921	156	11.69
1922	187	19.91
1923	155	11.49
1924	188	13.94

Number of women dying	g in, or in	consequence	of Child	Birth:—	
From Sepsis				0	

From other causes 0

Total number during the previous five years :-

From Sepsis 2
From other causes 1

Deaths of Children under one year of age per 1000 births.

		Total.	Male.	Female.	Death-rate.
Legitimate	• • •	12	6	6	51.2
Illegitimate	• • •		_		

Death-rate England and Wales 75.

During the previous five years.

	Total Deaths.	Death-rate.
1920 .	13	37.0
1921	20 -	62.8
1922	12	48.9
1923	14	53.2
1924	16	69.0

	19	925	Total during previous five years.
Deaths from Measles (all ages)		0	2
Death from Scarlet Fever (all ages)		0	1
Deaths from Whooping Cough (all ages)		0	5
Deaths from Diarrhœa (under 2 years of	age)	0	12
Deaths from Influenza (all ages)	•••	3	9
Deaths from Cancer (all ages)	• • •	20	122

The parts of the body primarily affected by Cancer during 1925, were:—Lip, 1; Fauces, 1; Upper Jaw, 1; Esophagus, 1; Stomach, 1; Colon, 1; Rectum, 5; Liver, 3; Pancreas, 1; Breast, 2; Uterus, 1; Peritoneum, 1; Glands, 1.

Table showing Causes of Death during the year 1925.

	CAUSES OF DEA	TH.		MALE.	FEMALE.
A	ıll Causes	•••	• • •	87	65
I	Enteric Fever	***		_	
2	Small Pox	•••	***	_	_
3	Measles	• • •			_
4	Scarlet Fever	• • •	•••	_	_
5	Whooping Cough	4 04		_	
5 6	Diphtheria	* * *		→	_
7	Influenza			I	2
8	Encephalitis Lethargia	• • •	•••	_	
9	Meningococcal Meningitis		• • •	_	_
IO	Tuberculous of Respiratory S	ystem		7	3
ΙI	Other Tuberculous Diseases				3 2 8
12	Cancer, Malignant Disease	۹	•••	12	8
13	Rheumatic Fever	•••		_	I
14	Diabetes		• • •	_	3 5 18
15	Cerebral Hæmorrhage, &c.		• • •	6	5
16	Heart Disease	• • •	•••	14	18
17	Arterio-sclerosis	• • •			3
18	Bronchitis			3	4
19	Pneumonia (all forms)	•••	• • •	5 3 3	I
20	Other Respiratory Diseases		• • •	_	I
21	Ulcer of Stomach or Duoden	um	• • •		<u> </u>
22	Diarrhœa, &c. (under 2 years	;)			-
23	Appendicitis and Typhlitis	•••	• • •	I	I
24	Cirrhosis of Liver	•••	• • •	_	_
25	Acute and Chronic Nephritis		• • •	4	4
26	Puerperal Sepsis				
27	Other Accidents and Disease	es of Pre	egnancy		
·	and Parturition	• • •			_
28	Congenital Debility & Malfor	mation 1	Premature		
	Birth	• • •	• •	5	4
29	Suicide	• • •	• • •	Ī	I
30	Other Deaths from Violence	• • •	• • •	3	2
31	Other Defined Diseases	• • •	• • •	21	12
32	Causes ill-defined or unknow		•••	I	_

Special Causes (included above).

Poliomyelitis	• • •	 	_
Policencephalitis	e 64'	 _	—

There have been no causes of Sickness or invalidity to be specially noted. Attention, however, may be drawn to the fact that the Agricultural Labourer, owing to exposure to all weathers, is more particularly prone to Rheumatism; and that in many instances the poor class of cottages which still exist, many with brick floors and no damp course, also conduces to Rheumatism.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

HOSPITALS PROVIDED OR SUBSIDISED BY THE LOCAL AUTHORITY OR COUNTY COUNCIL.

(1).—The West Suffolk General Hospital (Voluntary), situated in Bury St. Edmund's, and containing over 100 beds, is available for persons residing in the Thingoe District.

Besides the General Medical and Surgical Wards, it contains a Children's Ward; a Labour Ward; and a Maternity Ward for difficult cases and for those whose home surroundings are unsuitable. It is also fitted with an up-to-date X Ray and Ultra Violet Ray department; and a Pathological Laboratory.

An Orthopædic Clinic, and Clinics for Diseases of the Eye, and Ear and Throat have been established.

Besides the regular Medical and Surgical Staff, Specialists attend at regular times.

- (2).—The County Council provides a Sanitorium of 20 beds, —14 for male and 6 for female patients—which is situated on the Rougham Hill.
- (3).—The Tuberculosis Colony at Papworth is also available for advanced cases of Pulmonary Tuberculosis.
- (4).—There is no Maternity nor Children's Hospital provided by the Local Authority, but as already stated suitable Maternity cases and children can be admitted into the West Suffolk General. Hospital.

There is also a Maternity Ward at the Poor Law Institution.

(5).—There is no Fever Hospital, nor at present, any arrangements whereby patients suffering from an Infectious Disease can be admitted into a Fever Hospital.

In 1923 the Corporation of Bury St. Edmund's was approached, and this body agreed to receive Infectious cases into their Isolation Hospital from the Rural Districts of Thingoe and Brandon on certain terms. I regret, however, that no agreement was come to and the matter was allowed to drop.

(6).—There is a Small-pox Hospital at Fornham St. Martin, which is under the management of the West Suffolk County Council.

The County Council is the Small-pox Authority for the whole County, under an order from the Ministry of Health.

(7).—Only the Poor Law Institution is available for unmarried mothers, illegitimate infants, and homeless children. The elder children are however transferred as soon as possible to the Alexandra Children's Home, situated in Bury St. Edmund's.

It is proposed to do away with the Alexandra Home, and to erect a new and more commodious Home in its place.

(8).—There is a Home in connection with the St. Edmunds-bury and Ipswich Dioscesan Association for Preventive and Rescue Work. Last year 54 girls were admitted. Most of these were Preventive cases, and nearly all under 16 years of age.

Ambulance Facilities.

- (a) For infectious cases.—None.
- (b) For non-infectious and accident cases.—A motor ambulance is provided by the Suffolk Branch of the British Red Cross Society, on reasonable charges. The ambulance is available at all hours.

PUBLIC HEALTH OFFICERS OF THE LOCAL AUTHORITY.

(1).—Charles Scott Kilner, Medical Officer of Health. Part time. Exchequer grants contributed towards salary.

Qualifications, Bachelor of Medicine and Master in Surgery, Edinburgh University; Diploma of Public Health, Cambridge University.

Holds appointment as Medical Officer and Public Vaccinator of the Second and Seventh Districts, Bury St. Edmund's Union.

(2).—Charles Dudley Bright, Sanitary Inspector. Part time. Exchequer grants contributed towards salary.

Qualifications, Testamur, Institution of Municipal and County Engineers (1912). Qualification Certificate of the Royal Sanitary Institute (1909).

Holds appointment as Surveyor to the Council.

A whole time Assistant is employed in connection with the dual offices.

Mr. Bright's appointment, which was temporary in the first instance, was made permanent by the Minister of Health in September last, after an inspection by Dr. Letham.

PROFESSIONAL NURSING IN THE HOME.

- (a) General.—1n some cases by District Nurses.
- (b) For infectious diseases, e.g., Measles, etc.—No nurses are employed for Infectious Diseases.

The following Table shows the number of Nurse Midwives employed in the District, the Parishes in which they reside, and the Parishes which they serve:—

Residence.

Parishes.

One Nurse at Barrow—Barrow and Higham.*

One Nurse at Horringer—Horringer, Ickworth, Westley, Hawstead, Whepstead and Chevington.

One Nurse at Wickhambrook*—Part of Hargrave and Wickhambrook.*

One Nurse at Pakenham-Pakenham and Ixworth.

One Nurse at Beyton*-Rougham, Thurston,* Beyton,* and Hessett.*

One Nurse at Bradfield St. George—Bradfield St. George, Bradfield St. Clare and Rushbrooke.

One Nurse at Culford-Culford, Ingham, West Stow and Ampton.

One Nurse at Hengrave—Hengrave, Flempton, Risby, and Fornham All Saints.

One Nurse at Stanton—Stanton and Bardwell.

MIDWIVES.

One Lady Midwife at Lackford.

Note.—Parishes marked * do not belong to the Thingoe District.

It will be observed from the above Table that out of 48 Parishes, comprising the Thingoe District, only 24 Parishes are served by nine Nurses. All other Parishes in the District are without District Nurses, and are urgently in need of proper Nursing arrangments.

All the District Nurses are affiliated with the Suffolk Nursing Association, with the exception of one who is affiliated with the Queen Victoria Jubilee Institute for Nurses. The County Council pays one fifth of the Nurse's salary in most cases, as they are engaged by the County Council for Maternity and Child Welfare Work. Three of the County Health Visitors supplement the the work of the District Nurse, under the County Maternity and Child Welfare Scheme.

The Notification of Births Act is administered by the West Suffolk County Council, and all notifications are sent to the County Medical Officer.

Midwives.—Nurse Midwives are employed as stated above. There are no bona-fide Midwives practising in the District, but the name of one lady, not a District Nurse, appears in the register, and she takes a few cases. Practically all cases not attended by midwives are attended by medical men.

Clinics and Treatment Centres.—The West Suffolk County Council provides a Maternity and Child Welfare Centre at the Guildhall, Bury St. Edmunds, on the first Thursday in each month. The County Council also provides Clinics (a) for treatment under the Maternity and Child Welfare Act, (b) for school children, (c) for Tuberculosis, and (d) for Venereal Diseases, on Wednesdays and Saturdays, at the Shire Hall, Bury St. Edmund's.

As already stated, an Orthopædic Clinic, and treatment for diseases of the Eye, Ear and Throat, are available at the West Suffolk General Hospital.

A Dental Clinic has also been started by a whole-time qualified Dental Surgeon, who periodically visits all the Schools in the District.

LABORATORY WORK.

Chemical Work.—During the period under review 32 samples of water have been sent to the Public Analyst of which 12 were found to be unfit for drinking purposes.

Legislation in Force.—The following adoptive Acts are in Force:—Infectious Diseases Prevention Act 1890, adopted in 1891.

The Dairies, Cowsheds, Milkshops order, 1885, adopted in 1905.

Chicken Pox was made a Notifiable Disease, under the Infectious Diseases (Notification) Act 1899, from July 25th to December 31st, 1924.

SANITARY CIRCUMSTANCES OF THE AREA.

Water Supply.—The water supply throughout the district is almost invariably obtained from private wells of variable depths, although on the heavy soils water is occasionally taken from ponds. The water taken from deep wells is on the whole very good, although hard; but that taken from shallow wells is variable, and is at all times liable to pollution. During a dry summer some inconvenience is liable to be caused in places, owing to shortage of water, but last year the usual supply was fairly well maintained.

During the year five samples were taken for analysis, three of which were found unfit for drinking purposes.

Stanningfield.—This village had mainly been supplied from a large protected pond on the village green. As, however, the supply failed in dry seasons, the Council has acquired the right to utilise an existing deep well situated in a convenient position for public purposes.

One well was closed, fourteen were cleansed, deepened or repaired, and three new wells were sunk.

Rivers and Streams.—There are no factories in this district which would render rivers or streams liable to pollution.

The effluent from the Sewage Farm at West Stow, which takes the whole of the Sewage from Bury St. Edmund's, discharges into a stream which runs into the River Lark, at Lackford Bridge. The farm is well managed, and the effluent is rendered innocuous before reaching the river. No complaints regarding it have been received for many years.

A Sugar Beet Factory has recently been established in Bury St. Edmund's, the effluent from which runs into the River Lark. The factory has only been working for a short time, but I understand the effluent is efficiently dealt with before being discharged into the river. No complaints in connection therewith have been received by this Council.

Drainage and Sewerage.—In only a few parishes is there any regular system of drainage, and consequently waste and other waters are mostly disposed of by distribution upon the occupiers' garden ground. In the absence of adequate sewerage systems, perhaps less nuisance is caused by this means of disposal than by discharging drains into dead wells or open ditches. In some cases, however, drainage is discharged into small open ditches, where it quickly becomes absorbed before reaching the larger streams or rivers.

Closet Accommodation.—The pail closet is gradually replacing those of the privy vault type; 26 having been converted during the year.

In only a few parishes are there a limited number of hand-flushed water closets. It will be noted that 10 privies have been converted to the water carriage system.

The approximate number of each type of closet, as far as cottages are concerned, is—

Pail closets ... 1387
Privies ... 1022
Water closets ... 53

While in 1920, the numbers were—

Pail closets ... 1185
Privies ... 1181
Water closets ... 39

Scavenging.—No public scavenging is carried out in the district.

A scheme was prepared and approved for the collection of night soil in the parish of Ixworth, but in view of the unanimous opposition of the Parish Council the matter was dropped.

SANITARY INSPECTION OF THE AREA.

A Tabular Summary of the Sanitary Work accomplished during the year, has been prepared by the Sanitary Inspector, from which it will be seen that steady progress has been made.

I would draw attention to the fact that 1396 inspections were made, and that 334 nuisances were dealt with.

A special Table dealing with the number of nuisances existing at the commencement of each quarter, and the number abated in each quarter is appended.

It was not found necessary to serve any statutory notices, only informal notices being required.

There are no Bye-laws in force in the district.

There are no offensive trades and no underground sleeping rooms.

The four outworkers premises (tailoring), were inspected and found satisfactory.

Schools.—Twenty-seven visits have been paid to Schools during the year.

Most of the closets are now of the pail system, and it is hoped to bring all others into line shortly.

The County Medical Officer of Health is also the School Medical Officer, and he generally recommends the closure of schools, and the exclusion of scholars from school when necessary.

The Sanitary Inspector's Report.

SUMMARY OF SANITARY WORK COMPLETED DURING THE YEAR 1925.

Number of visits made ,, Complaints received ,, Nuisances dealt wit ,, Statutory notices see ,, Informal notices see Details of time taken to carry	h erved eved	the wo	ork, sh	own q	uarter	1396 7 334 Nil 233
Period, 1925.	Number of Nuisances.	Completed March 31st	Completed June 30th	Completed Sept. 30th	Completed Dec. 31st	Remaining.

(a) From Jan. 1st to March 31st	78	50	26	2		_
(b) From April 1st to June 30th	99	_	58	28	12	I (work
(c) From July 1st to Sept. 30th	93	_	-	51	25	17
(d) From Oct. 1st to Dec. 31st	64				60	4

	Totals	334	50	84	81	97	22
Total					334		

Completed .. 312
Outstanding at end of year 22

SUMMARY OF WORK DONE UNDER THE HOUSING AND PUBLIC HEALTH ACTS.

Number of Premises inspected	744
" Houses, the defects of which were remedied	
without the making of Closing Orders	. 91
" instances where overcrowding conditions	
have been remedied	
" houses demolished voluntarily by owners	. 2
,, houses to which guttering and waterspouts	
have been provided or repaired	11

CLOSET ACCOMMODATION AND DRAINAGE.

Number	of Pail Closets erected	l (additional	l accommo	dation)	3
	pail closets repaired		• • •	• • •	9
,,	pail closets cleansed		• • •	• • •	6
,,	Privies converted in	to Pail Clos	ets		26
,,	privies converted int	o hand-flush	ed W.C.'s		10
,,	privies repaired	• • •	•••		9
,,	privy vaults emptied	l	• • •	•••	18
,,	cesspools emptied ar	id repaired	• • •	• • •	13
,,	drains constructed,	repaired and	d trapped	• • •	24
,,	blocked drains clear	ed	• • •	• • •	9
,,	yard drains improve	d	• • •	• • •	9
,,	open ditches cleanse	ed	• • •	• • •	8
	W A TYP.	R SUPPLY	7		
3 T 1			L •		_
Number	of Samples taken for			• • •	5
"	samples found to be	unnt for di	rinking pur	poses	3
"	new wells sunk	• • •	• • •	• • •	3
"	wells closed	• • •	• • •	• • •	1
"	wells repaired	•••	• • •	• • •	9
"	wells deepened	• • •	• • •	• • •	1
"	wells cleansed	• • •	• • •	• • •	4,
"	Pumps repaired	• • •	• • •	•••	4
"	Ponds cleaned out	•••	• • •	• •	
	SC	HOOLS.			
Number	of visits to School Pr	remises	• •	• • •	27
,,	Schools where privie		converted	into	
	" Pail Close		1	• • •	
"	" provided wi		il sanitary		
	accommo			1	
,,	,, where sanit	• •	ements hav	e been	0
	effected	• • •	•••	• • •	3
"	,, disinfected	•••	• • •	• • •	
	MISCE	LLANEOU	rs.		
Number	of houses disinfected				14
	houses cleansed	***			3
"	visits made in conne	ection with	Infectious	Disease	35
"	visits made to dairie				131
"	retail purveyors of				17
"	wholesale traders an		s of milk		45
"	retail purveyors of	A		the year	6
"	wholesale traders an	_		J.I.O J Otti	J
"	registered durin	<u> </u>			12
	- op - ot ou watering	0 110 1 001		•••	-A. desj

"	cowsheds erected	• • •	1
"	premises converted into cowsheds	• • •	1 8
"	cowsheds altered or repaired	•••	11
	cowsheds lime-washed and cleansed	• • •	14
"	visits to slaughter houses	• • •	135
"	registered slaughter houses		15
29	slaughter houses erected		1
"	alkanad an manainad	•••	7
"		•••	4
"	in lbs. of meat condemned as unfit for human	•••	71
"		1	7
	consumption	• • •	′
3 2	nuisances caused by the improper keeping		_
	of animals	• • •	5
,,	offensive accumulations removed	•••	29
,,	visits to workshops	• • •	66
,,	bakehouses in the district		2 2
,,	,, altered or repaired	•••	3
"	,, lime-washed and cleansed	• • •	22 3 6
,,	visits made to outworkers' premises	• • •	4

C. DUDLEY BRIGHT,

M.Inst. M. &. Cy.E., A.R.San. I.,

Sanitary Inspector,

65, Churchgate Street, Bury St. Edmund's.

HOUSING.

(1). General Housing Conditions in the Area.

Houses occupied by the working classes may roughly be divided into three classes.

First some very good cottages, which are chiefly to be found on the large estates or the closed villages. This class are largely constructed of brick or flint and rubble walls, with slate or tile roofs, and they generally contain three bedrooms, and two sittingrooms, and have the usual outhouses.

Another class are those built of lath and plaster walls, with slate or tile roofs, and they generally contain two bedrooms, a living-room, and a scullery or pantry.

The third class are the thatched dwellings, many of which have old wattle or clay lump walls, while the ground floor is often below the level of the surrounding garden ground, and the floor consists of bricks laid on the bare earth. These cottages usually contain two bedrooms and one living-room.

It is amongst the two latter classes, and especially amongst the thatched houses, that the most serious defects are to be found. These defects being chiefly (a) the existence of excessive dampness, (b) insufficient lighting and ventilation, (c) general dilapidations.

Although the need for further houses is not so pressing as it was, still there is a need, and this will be accentuated when some of the poorer class of houses already condemned are closed.

The following Table shows the number of new houses erected during the year 1925.

	In course of erection Dec., 1924.	Completed during 1925.	In course of erection. Dec. 31st, 1925. (c)
As part of a Municipal Housing Scheme Private Enterprise with Subsidy under 1923 Act	2	4	
Private Enterprise Total	6	14.	9

NOTE.—Figures in column (b) include those shown in column (a).

A housing inspection has recently been completed at Ixworth, and although it was not found necessary to immediately close any of the cottages, the need for further accommodation was recognized, and the Housing Committee have been instructed to prepare a scheme for the erection of four cottages in that vicinity.

(2). Overcrowding.

There is no marked overcrowding in this district. Where it does exist, it is mainly due to the small size of the houses as compared to the large families to be accommodated, thus not admitting of the proper separation of the sexes when children reach the age of twelve and upwards. It is to be noted moreover that some of the larger houses in a village are not necessarily occupied by the biggest families. In many of these cases, girls after leaving school, go out to service, thus to a certain extent relieving the overcrowding.

(3). Fitness of Houses.

(a) The General Standard of houses is as already stated.

(b) The chief defects are found to arise from general dilapidations, insufficient height of bedrooms and living-rooms, dampness due to absence of damp course, want of sufficient accommodation for

storing food and for washing facilities, insufficient circulation of air, badly lighted houses, and houses of poor structure.

It will be noticed from the Sanitary Inspector's Report that in 91 houses, defects of one sort or another have been dealt with.

Bye-laws relating to houses.

There are no Bye-laws in force in the district. I would strongly recommend that Bye-laws relating to the construction of new houses be adopted.

HOUSING STATISTICS FOR THE YEAR 1925.

The Ministry of Health has drawn up the following table, which I have endeavoured to fill up as far as possible:—

Number of New Houses erected during the year. (a) Total (including numbers given separately under (b) 14 (b) With State assistance under the Housing Acts. (1) By the Local Authority (2) By other bodies or persons 4 Unfit Dwelling Houses. 1. Inspection—(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) 228 (2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910, or the Housing Consolidated Regulations, 1925 87 (3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation (4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation 91 2. Remedy of Defects without Service of formal Notices. Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers 74 Action under Statutory Powers. 3.

A.—Proceedings under section 3 of the Housing

(1) Number of dwelling-houses in respect of

which notices were served requiring repairs ...

Act, 1925.

(2)		
	rendered fit:—	
	(a) by owners (1) by T and T and T	turn-mail:
(9)	(b) by Local Authority in default of owners	
(3)		
	which Closing Orders became operative in	
	pursuance of declarations by owners of inten- tion to close	
	tion to close	
В.—Р	Proceedings under Public Health Acts.	
(1)	Number of dwelling-houses in respect of	
` ′	which notices were served requiring defects	
	to be remedied	*
(2)	Number of dwelling-houses in which defects	
	were remedied after service of formal notices:	
	(a) by owners	
	(b) by Local Authority in default by owners	
	* All dealt with by informal notices.	
	III deart with by informal hotices.	
C.—P	roceedings under sections 11, 14 and 15 of the	
	Housing Act, 1925:—	
(1)	Number of representations made with a view	
	to the making of Closing Orders	
(2)	Number of dwelling-houses in respect of which	
	Closing Orders were made	
(3)	Number of dwelling-houses in respect of which	
	Closing Orders were determined, the dwelling-	
, ,	houses having been rendered fit	
(4)	Number of dwelling-houses in respect of which	
	Demolition Orders were made	-
(5)	Number of dwelling-houses demolished in	
	pursuance of Demolition Orders	

INSPECTION AND SUPERVISION OF FOOD.

(a) Milk Supply.

The wholesomeness of the milk produced in the area is almost invariably of a good quality. What is not used or consuled in the area, is sent to Bury St. Edmund's or other places.

No tuberculous milk, or tuberculous cattle have come under the notice of the Local Authority.

Dairies and Cowsheds.

The Register relating to Dairies and Cowsheds has been thoroughly revised, and there are now on the books—

Retail Purveyors of Milk, 17.

Wholesale Traders and Producers, 45.

During the past year 6 Retail Purveyors and 12 Wholesale Traders and Producers have been registered.

There have been made 131 visits, and a general improvement may be recorded.

(b) Meat.

The Rural Districts Councils (Slaughter Houses) Order, 1924, was duly put into operation.

No Bye-laws have been adopted.

One new Slaughter House has been erected, and improvements effected in seven other instances.

Frequent inspection, especially at the time of killing, is made, and the conditions may be regarded as generally satisfactory.

Table showing the number of Private Slaughter Houses in the area at the dates mentioned.

D 1.4	In 1920.	In Jan. 1925.	In Dec. 1925.
Registered Licensed		1 Knacker's yard	1 Knacker's yard
Total	9*	14*	16

(* These were in existence but not registered).

There is no Public Abattoir.

(c) Other Foods.

Bakehouses.—There are 22 Bakehouses in the district. They have all been lime-washed during the year, and in three cases extensive improvements have been effected.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES.

Infectious Deseases Generally.

It will be noticed from the Subjoined Table that the district during the past five years has been very free from Infectious Diseases of all sorts.

Table showing the number of cases notified, and the number of deaths due to the principal Infectious Diseases during the four years 1920 to 1924.

A CHARLESTON OF THE PARTY OF TH							
Influenza.	Deaths.		н	9	01	I	10
n Pox.	Deaths.			1	1	1	I
Chicken Pox.	Notified.		1	İ	1	32	32
Measles.	Deaths.		1	1	1	н	н
Mea	.bəhito V		1	1	J	~	· .
Pneumonia.	Deaths.	4	9	7	س	7	29
Pneur	Notified.	н		81	n	0	~
uerperal Fever.	Deaths.	I	, ped	H	1		3
Puerperal Fever.	.bəhitoM	н	61	H	1	1	4
Fever.	Deaths.			1	1	1	I
Enteric Fever.	Notified.	1	l	1	1	1	
Diphtheria.	Deaths.	н	H		н		33
	Notified.	~	က		9	H	18
Scarlet Fever.	Deaths.		H	I	1	I	2
Scarlet	.beatited.	21	17	13	72	2	57
Small Pox.	Deaths.	ı	1	1	1,	I	
Small	Notified.			İ		J	1
	Periods.	1920	1921	1922	1923	1924	Total

In no case did the disease spread to any extent.

The most noteworthy sources of these diseases were.

- (a) A small outbreak of Diphtheria occurred in 1923 which was traced to one of several children sent by the "Children's Country Holiday Fund Committee." The child was subsequently found to be a "carrier."
- (b) In 1924 four cases of Scarlet Fever all confined to one family were traced to some London children sent on a holiday to the district.
- (c) Last year some children from this district and from another district went for a holiday, immediately after their return home one of the children developed Scarlet Fever. The Medical Officer of Health for the district to which the other children belonged was immediately notified.

The Thingoe District Council supplies Diphtheria Antitoxin to all medical men practising within the district. This can be obtained at any time on application to the Medical Officer of

Health.

The County Council also supplies Tetanus and Anti-Meningococci Serum.

Up to the present, the Schick and Dick tests for Diphtheria

and Scarlet Fever have not been employed.

The County Council provides for the examination of sputa, nose and throat swabs, blood for Widal and Wasserman re-action,

gonococci, spirochætes, and cerebro-spinal fluid.

There being no Intectious Hospital and no Disinfecting Station, all infected clothing and bedding has to be disinfected at the house wherein the disease occurred. The means employed are by Formaldehyd gas fumigation, and spraying with Formalin. Disinfectants are also supplied, and printed precautions to be observed, are given to the persons in charge of infected houses.

Arrangements are made for the cleansing of verminious

persons and their clothing at the Poor Law Institution.

There have been no vaccinations nor re-vaccinations performed by the Medical Officer of Health under the Public Health (Small Pox prevention) Regulations 1917.

The number of children under one year of age vaccinated by the Public vaccinators during the year ending September 1925

was 127.

In recent years there has been a steady increase in the number of Cancer cases, the Death Rate from this source amount-

ing to about 1.5 per 1000.

Disinfection is generally carried out after a death from this cause. The destruction of clothing etc. which cannot be properly disinfected, especially in cases where there has been an open sore, is desirable.

Erysipilas. 0 Deaths Deaths. 1 Notified NOTIFIABLE DISEASES (OTHER THAN TUBERCULOSIS) DURING THE YEAR 1925. Encephalitis Lethargica. Deaths Blindness. Total Notified Pneumonia. 0 1 Deaths Impaired. Vision d ∞ Notified Puerperal Fever. 0 | Deaths 0 Notified Unimpaired. Vision 0 1 Deaths Fever. Enteric 0 1 Notified In Hospital. 0 Diphtheria. Deaths **l'reated** 0 Notified At Home. 0 Deaths Scarlet Fever. ∞ Ø Ø 4 Notified Notified. 1 Deaths 0 Small Pox. Notified 0 Neonatorum. Age Periods. Opthalmia under I year 65 and upwards Totals 10 15 20 35 45 65

The case of Encephalitis Lethargica was removed to the West Suffolk General Hospital.

TUBERCULOSIS.

New cases and mortality during 1925.

		New Cases.				Deaths.			
Age Periods.	Pulm	Non- Pulmonary.		Pulmonary		Non- Pulmonary			
	М	F	M	F	M	F	M	F	
0					-	-			
I		—						_	
5		—	I	I				_	
10		—		I				I	
15	I	I		2	—			—	
20	I			·	I	_		—	
25	2	I	-	—	2	I			
35	I	1		-	_	I	_	—	
45	2 :				3	ı			
55	2	_			I	—			
65 and upwards				•		-			
Totals	9	3	I	4	7	3	0	I	

Tuberculosis Cases are dealt with by the Tuberculosis Officer, and when deemed necessary, they are visited by one of the Health Visitors.

After the death or removal of a person suffering from Tuberculosis, the house is disinfected by the Sanitary Inspector.

No Tuberculous person employed in the milk trade has been notified.

No action has been taken under the Public Health Act, 1925, Section 62.

MATERNITY AND CHILD WELFARE.

- (1).—The inspection of Midwives, and the other activities of the Local Supervising Authority under the Midwives' Acts, 1902 and 1918, is carried out by the West Suffolk County Council.
- (2).—The general arrangements for carrying out Maternity and Child Welfare Schemes is also undertaken by the West Suffolk County Council.
- (3).—During last year there was no mortality amongst children from either Measles, Whooping Cough, Diarrhœa or Poliomyelitis, and no cese of Puerperal Fever or Ophthalmia Neanatorum was notified.

In conclusion, I congratulate you on the general.health of the district which I think may be considered as highly satisfactory.

I have the honour to be, Ladies and Gentlemen,

Your obedient Servant,

CHARLES SCOTT KILNER,

M.B., C.M., Edin.; D.P.H., Cambs.,

Medical Officer of Health.

Bury St. Edmund's,

March 15th, 1926.

